

842486-18

3034603

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJN000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521142 FLE	
5. Generator's Name and Mailing Address US EPA REGION II - RARITAN BAY SITE 2890 WOODBRIDGE AVE EDISON NJ 08837 Generator's Phone: (908)420-4455			Generator's Site Address (If different than mailing address) US EPA REGION II - RARTAN BAY SITE 170 STATE ROUTE 35 NORTH KEYPORT NJ 07735			
6. Transporter 1 Company Name HORWITH TRUCKS INC			U.S. EPA ID Number PAD146714878			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive Facility's Phone: HATFIELD, PA 19440 (215) 822-8995			U.S. EPA ID Number PAD085690592			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.
	X	1. NA3077 HAZARDOUS WASTE, SOLID, N.O.S. (LEAD) 9 PGIII	1 DT		Est 23	T
		2.				
		3.				
		4.				
13. Waste Codes D008						
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name ANDREW L. CONNORINI Signature ANDREW L. CONNORINI Month Day Year 1/10/18						
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:			
	Transporter signature (for exports only):					
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name SCOTT M. Nye	Signature SCOTT M. NYE	Month Day Year 1/10/18			
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature Month Day Year			
18. Discrepancy						
18a. Discrepancy Indication Space Sec 11- 47060 Sec 12-P <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H110		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Paul Connor		Signature PAUL CONNOR		Month Day Year 1/10/18		



Stericycle

Environmental Solutions

LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

Generator Name: US EPA REGION II - RARITAN BAY

NJN000206276

Manifest Number: 011521142FLE

Generator EPA ID Number:

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 696179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

0008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: _____

Title: _____

Date: _____

REPUBLIC ENV SYS (PA) LLC

Date: 1/19/18

Document: 842486-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

City: KEYPORT

State: NJ Zip: 07735

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

FORM 110

Horowitz

TRUCK #

223

BOX #

10:51 AM
01-10-18
G 72040 1b

SIZE

011521142

GENERATOR

ORDER #

[Signature]

Driver's Signature

BILLING DEPT.

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

Horowitz

TRUCK #

223

BOX #

10:51 AM
01-10-18
G 72040 1b

SIZE

011521142

GENERATOR

ORDER #

11:41 AM
01-10-18
G 24980 1b

[Signature]

Driver's Signature

PLANT

*47060
23.535*

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1268
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ove the
to meet
possibility
of the

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJN0000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521141 FLE		
5. Generator's Name and Mailing Address US EPA REGION II - RARITAN BAY SITE 2890 WOODBRIDGE AVE Generator's Phone: EDISON NJ 08837			Generator's Site Address (if different than mailing address) US EPA REGION II - RARITAN BAY SITE 170 STATE ROUTE 35 NORTH KEYPORT NJ 07735				
6. Transporter 1 Company Name HORWITH TRUCKS INC			U.S. EPA ID Number PAD146714878				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive Facility's Phone: HATFIELD, PA 19440 (215) 822-8995			U.S. EPA ID Number PAD085690592				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
X	1. NA3077 HAZARDOUS WASTE, SOLID, N.O.S. (LEAD) 9 PGIII	1		DT	23	T	D008
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A							
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Generator's/Officer's Printed/Typed Name ANDREW L. CONFORTINI				Signature [Signature]		Month Day Year 1/10/18	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name [Signature] Signature [Signature] Month Day Year 1/10/18							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection SEZ111 42560 Solid P Manifest Reference Number: _____ U.S. EPA ID Number							
18b. Alternate Facility (or Generator) Facility's Phone: _____ U.S. EPA ID Number							
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H110		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name [Signature] Signature Month Day Year 1/10/18							



Stericycle

Environmental Solutions

LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

Generator Name: US EPA REGION II - RARITAN BAY

NJN000208276

Manifest Number: 011521141FLE

Generator EPA ID Number:

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 696179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

D008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: 

Title: 

Date: 

REPUBLIC ENV SYS (PA) LLC

Date: 1/19/18

Document: 842485-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

City: KEYPORT

State: NJ Zip: 07735

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

FORM 110

TRUCK #

Horw: th
228

BOX #

SIZE

10:44 AM
01-10-18
G 67320 1b

GENERATOR
US EPA Region II

Key Bit NO-
ORDER #

Raritan
Bay
sites

011521/41 FLE



Driver's Signature

BILLING DEPT.

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

TRUCK #

Horw: th
228

BOX #

SIZE

10:44 AM
01-10-18
G 67320 1b

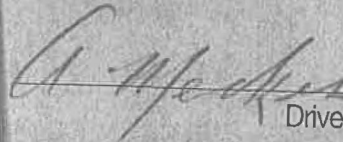
GENERATOR
US EPA Region II

Key Bit NO-
ORDER #

Raritan
Bay
sites

011521/41 FLE

04:23 PM
01-10-18
G 24760 1b



Driver's Signature

PLANT

42560
21.28T

842484-18

3034603

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJN000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521140 FLE		
5. Generator's Name and Mailing Address US EPA REGION II - RARITAN BAY SITE 2890 WOODBRIDGE AVE EDISON NJ 08837			Generator's Site Address (if different than mailing address) US EPA REGION II - RARITAN BAY SITE 170 STATE ROUTE 35 NORTH KEYPORT NJ 07735				
6. Transporter 1 Company Name HORWITH TRUCKS INC			U.S. EPA ID Number PAD146714878				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive HATFIELD, PA 19440 (215) 822-8995			U.S. EPA ID Number PAD085690592				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077 HAZARDOUS WASTE, SOLID, N.O.S. (LEAD) 9 PGIII	1 DT		Est 23	T	D008	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name ANDREW L. CONFORMAN				Signature <i>[Signature]</i>		Month Day Year 1/10/18	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Bill Peterson				Signature <i>[Signature]</i>		Month Day Year 1/10/18	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection SECT 11 44400 Sect 11 P							
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____							
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H110		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Paul Connell				Signature <i>[Signature]</i>		Month Day Year 01/10/18	



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LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

Generator Name: US EPA REGION II - RARITAN BAY

NJN000208276

Manifest Number: 011521140FLE

Generator EPA ID Number:

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 896179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

D008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: 

Title: 

Date: 

REPUBLIC ENV SYS (PA) LLC

Date: 1/19/18

Document: 842484-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

City: KEYPORT

State: NJ Zip: 07735

Hauler:

HORWITZ

Trailer No.:

226

Waste ID: LEAD IMPACTED SOIL AND DEBRIS

D008

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

FORM 110

TRUCK #

226

BOX #

HORWITZ

SIZE

10:47 AM

01-10-18

G 69620 1b

GENERATOR

ORDER #

11521140

Bill

Driver's Signature

BILLING DEPT.

**STERICYCLE
ENVIRONMENTAL SOLUTIONS**
HATFIELD, PA 19440

TRUCK #

226

BOX #

HORWITZ

SIZE

10:47 AM

01-10-18

G 69620 1b

GENERATOR

ORDER #

11521140

11:30 AM

01-10-18

G 25220 1b

44400
22.25

Bill

Driver's Signature

PLANT

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJN000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521139 FLE		
		5. Generator's Name and Mailing Address US EPA REGION II - RARITAN BAY SITE 2890 WOODBRIDGE AVE Generator's Phone: EDISON NJ 08837		Generator's Site Address (if different than mailing address) US EPA REGION II - RARITAN BAY SITE 170 STATE ROUTE 35 NORTH KEYPORT NJ 07735			
6. Transporter 1 Company Name HORWITH TRUCKS INC.		U.S. EPA ID Number PAD146714878		7. Transporter 2 Company Name U.S. EPA ID Number			
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive Facility's Phone: HATFIELD PA 19440 (215) 822-8995		U.S. EPA ID Number PAD085690592					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. HA3077 HAZARDOUS WASTE, SOLID, H.O.S. (LEAD) 9 PGIII	1 DT		Est 23		D008
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A							
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Generator's/Officer's Printed/Typed Name ANDREW L. CONFORTI		Signature <i>[Signature]</i>		Month 1		Day 10	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:		Year 18		
	Transporter signature (for exports only): <i>[Signature]</i>		Date leaving U.S.:				
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Scott M Nye		Signature <i>[Signature]</i>		Month 1		
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Day 10		
					Year 18		
	18. Discrepancy						
	18a. Discrepancy Indication Space Sec 11 - 43980 <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: Sec 12 P						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number					
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)		Month 01					
		Day 10					
		Year 18					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H110		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name JASON EB		Signature <i>[Signature]</i>		Month 01		Day 10	
				Year 18			



Stericycle®
Environmental Solutions

1

LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

Generator Name: US EPA REGION II - RARITAN BAY

NJN000206276

Manifest Number: 011521139FLE

Generator EPA ID Number:

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 898179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

0008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: _____

Title: _____

Date: _____

REPUBLIC ENV SYS (PA) LLC

Date: 1/10/18

Document: 842483-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

City: KEYPORT

State: NJ Zip: 07735

Hauler:

Horwith

Trailer No.:

223

Waste ID: LEAD IMPACTED SOIL AND DEBRIS

D008

Profile: 696179-02

Sampled By:

Unloaded By:

Unloaded To:

Drum Nos:

STERICYCLE
ENVIRONMENTAL SOLUTIONS
HATFIELD, PA 19440

FORM 110

Horwith

TRUCK #

223

BOX #

03:49 PM

01-10-18

G 68960 1b

SIZE

011521139

GENERATOR

11:41 AM

01-10-18

G 24980 1b

ORDER #

43980 #

21.99 Tons

[Signature]

Driver's Signature

BILLING DEPT.

842482-18

3034603

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJN000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521138 FLE		
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7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive HATFIELD, PA 19440 (215) 822-8995 Facility's Phone:				U.S. EPA ID Number PAD085690592			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
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	3.						
	4.						
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A							
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Generator's/Offoror's Printed/Typed Name ANDREW L. CONFORTI				Signature [Signature]		Month Day Year 1/10/18	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name [Signature] Signature Month Day Year 1/10/18							
Transporter 2 Printed/Typed Name [Signature] Signature Month Day Year							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection SECU 43960 Sec 211 P Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H110 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name [Signature] Signature Month Day Year 01/10/18							



Stericycle®

Environmental Solutions

LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

Generator Name: US EPA REGION II - RARITAN BAY
Manifest Number: 011521138FLE

Generator EPA ID Number: NJN000206276

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 698179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

0008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: _____

Title: _____

Date: _____

REPUBLIC ENV SYS (PA) LLC

Date: 1/10/18

Document: 842482-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

ORT

State: NJ Zip: 07735

FORM 110

STERICYCLE
ENVIRONMENTAL SOLUTIONS
HATFIELD, PA 19440

TRUCK # *Horowitz*
228

BOX #

SIZE

03:57 PM
01-10-18
G 68740 1b

GENERATOR

US EPA
Raritan Bayside Keyport NJ
ORDER #

011521138 FLE

A. Speck
Driver's Signature
BILLING DEPT.

STERICYCLE
ENVIRONMENTAL SOLUTIONS
HATFIELD, PA 19440

TRUCK # *Horowitz*
228

BOX #

SIZE

03:57 PM
01-10-18
G 68740 1b

GENERATOR

US EPA
Raritan Bayside Keyport NJ
ORDER #

011521138 FLE

04:23 PM
01-10-18
G 24780 1b

43960
21.985
A. Speck
Driver's Signature
PLANT

842481-18

3034603

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJIN000206276	2. Page 1 of 1	3. Emergency Response Phone (888) 814-7477	4. Manifest Tracking Number 011521137 FLE		
5. Generator's Name and Mailing Address US EPA REGION II - RARITAN BAY SITE 2890 WOODBRIDGE AVE				Generator's Site Address (if different than mailing address) US EPA REGION II - RARITAN BAY SITE 170 STATE ROUTE 35 NORTH			
Generator's Phone: EDISON NJ 08837 (908) 420-4455				KEYPORT NJ 07735			
6. Transporter 1 Company Name HORWITH TRUCKS INC.				U.S. EPA ID Number PAD146714878			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2869 Sandstone Drive				U.S. EPA ID Number PAD085690592			
Facility's Phone: WATEFID, PA 19440 (215) 822-8995							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077 HAZARDOUS WASTE, SOLID, N.D.S. (LEAD) 9 PGIII	1 DT		Est 83	T	D008	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information (1) 696179-02 - ERG(171) LEAD IMPACTED SOIL A LAST ONE							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name ANDREW L. CONFORTINI				Signature <i>[Signature]</i>		Month Day Year 1/10/18	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Bill Pearson Signature: <i>[Signature]</i> Month Day Year: 1/10/18 Transporter 2 Printed/Typed Name: Signature: Month Day Year:							
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Sec 11 - 35740 Sec 12 - P Manifest Reference Number: U.S. EPA ID Number							
18b. Alternate Facility (or Generator) Facility's Phone: U.S. EPA ID Number							
18c. Signature of Alternate Facility (or Generator) Month Day Year:							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H110 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: JASON Erb Signature: <i>[Signature]</i> Month Day Year: 01/10/18							



Stericycle

Environmental Solutions

LAND DISPOSAL RESTRICTION NOTIFICATION CERTIFICATION FORM

1

Generator Name: US EPA REGION II - RARITAN BAY

NJN000206276

Manifest Number: 011521137FLE

Generator EPA ID Number:

The purpose of this form is to provide appropriate notification/certification, in accordance with the Land Disposal Restriction regulations set forth in 40 CFR Part 268, to the treatment, storage or disposal facility which receives the wastes referenced below. In accordance with the waste analysis and recordkeeping requirements specified in 40 CFR 268.7, I have indicated below the relevant information required to properly manage my waste(s) in compliance with the Land Disposal Restriction treatment standards found in 40 CFR 268 and any applicable prohibition levels set forth in 40 CFR 268.32 or RCRA section 3004(d).

Line 1 Profile: 696179-02

Treatability Group: Non-WasteWater

UHC's: N

Class Group: A

Waste Codes

D008 - LEAD

See back for descriptions of classification groups and classification group certification statement.

I hereby certify that I believe that the information I submitted herein is true, accurate and complete.

Signature: 

Title: 

Date: 

REPUBLIC ENV SYS (PA) LLC

3034603

Form Approved. OMB No. 2050-0039

Date: 1/10/18

Document: 842481-18 Line# 1

Manifest#:

Generator's Name: US EPA REGION II - RARITAN BAY

Address: 170 STATE ROUTE 35 NORTH

City: KEYPORT

State: NJ Zip: 07735

1st Tracking Number

11521137 FLE

(ress)

TE

Number

46714878

D Number

ID Number

STERICYCLE ENVIRONMENTAL SOLUTIONS HATFIELD, PA 19440

FORM 110

WAP ID: 01772279

TRUCK #

226

BOX #

HORWITZ

SIZE

GENERATOR

ORDER #

11521137

04:11 PM

01-10-18

G 60940 1b

11:30 AM

01-10-18

G 25200 1b

35740 #

17.87 Tons

Bad

Driver's Signature

BILLING DEPT.

35740 #

1085690592

12. Unit
Wt./Vol.

13. Waste Codes

0008

T

fully and accurately described above by the proper shipping name, and are classified, packaged, labeled, and marked in accordance with applicable international and national governmental regulations. If export shipment and I am the Primary Generator or (b) (if I am a small quantity generator) is true.

Signature

Month Day Year
1/10/18

S.

Port of entry/exit:

Date leaving U.S.:

Signature

Month Day Year
1/10/18

Signature

Month Day Year

☐ Residue

☐ Partial Rejection

☐ Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

18b. Alternate Facility (or Generator)

Facility's Phone:

18c. Signature of Alternate Facility (or Generator)

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. H110 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name

JASON

Erb

Signature

Jason Erb

Month Day Year
1/10/18